

HEALTH FACILITY REPORTING FORM

(Required by Section 805 of the Business and Professions Code)

NOTE: Certain actions, with respect to staff privileges, membership or employment of Dentists or health care providers must be reported to the Dental Board of California when they are imposed or voluntarily accepted for a dental disciplinary cause or reason. Please see the reverse side of this form for further information, including who must report and when this report must be filed.

1. Name of Reporting Entity (See Reverse Side)	2. Telephone Number
3. Address	
4. Name of Licensee	5. License Number
6. Address	
7. Type of License Held () Dentist () Hygienist () Registered Dental Assistant	
8. Date(s) of Action(s) and Duration (attach additional sheets if necessary)	

9. Type(s) of Action(s) Check all that apply (See reverse Side)

(a) For a dental disciplinary cause or reason:

<input type="checkbox"/> Denial/rejection of application for staff privileges	<input type="checkbox"/> Termination or revocation of staff privileges
<input type="checkbox"/> Denial/rejection of application for membership	<input type="checkbox"/> Termination or revocation of membership
	<input type="checkbox"/> Termination or revocation of employment

(b) For a cumulative total of 30 days or more for any 12 month period, and for a dental disciplinary cause or reason:

<input type="checkbox"/> Restriction(s) imposed on staff privileges	<input type="checkbox"/> Restriction(s) voluntarily accepted on staff privileges
<input type="checkbox"/> Restriction(s) imposed on membership	<input type="checkbox"/> Restriction(s) voluntarily accepted on membership
<input type="checkbox"/> Restriction(s) imposed on employment	<input type="checkbox"/> Restriction(s) voluntarily accepted on employment

(c) Following notice of an impending investigation based on information indicating dental disciplinary cause or reason:

<input type="checkbox"/> Licensee resigned from staff	<input type="checkbox"/> Licensee took leave of absence from staff
<input type="checkbox"/> Licensee resigned from membership	<input type="checkbox"/> Licensee took leave of absence from membership
<input type="checkbox"/> Licensee resigned from employment	<input type="checkbox"/> Licensee took leave of absence from employment

(d) For a summary suspension that remains in effect for a period in excess of 14 days for a dental disciplinary cause or reason:

<input type="checkbox"/> Imposition of summary suspension on staff privileges	<input type="checkbox"/> Imposition of summary suspension on membership
<input type="checkbox"/> Imposition of summary suspension on employment	

If staff privileges were restricted, list specific restrictions imposed or voluntarily accepted:

10. DESCRIPTION OF ACTION:

Describe the facts and circumstances of the dental disciplinary cause or reason, and any other relevant information related to the action taken, including, but not limited to the number of cases reviewed, time frame covered, any patient deaths involved, any malpractice filings as a result of the dentist's actions, any expert/peer opinions obtained, etc.

ATTACH ADDITIONAL SHEET(S)

Type Name of Chief Executive Officer/Dental Director/Administrator

Type Name of Chief of Dental Staff (if any)

Signature

Date

Signature

Date

SPECIFIC INSTRUCTIONS
(Refer to Corresponding Number on Reverse)

1. NAME OF REPORTING ENTITY

The persons in subparagraphs (a) and (b) of Section 805 of the Business & Professions Code are required to report. (Note: Both the Chief Executive Officer and Chief of the Dental Staff, where one exists, are required to sign this report.)

- (a) The Chief of Staff of a Dental Staff or Professional Staff or other Chief Executive Officer, Dental Director or Administrator of any Peer Review Body:
- (i) A Dental or Professional Staff of any health care facility or clinic licensed under Division 2, commencing with Section 1200, of the Health and Safety Code or a facility certified to participate in the Federal Medicare program as an ambulatory surgery center.
 - (ii) A health care service plan registered under Chapter 2.2, commencing with Section 1340, of Division 2 of the Health and Safety Code or a nonprofit hospital service plan regulated under Chapter 11a, commencing with Section 11491, of Part 2 of Division 2 of the Insurance Code.
 - (iii) Any dental or dental professional society having as members at least 25% of the eligible licensees in the area in which it functions (which must include at least one county), which is not organized for profit and which has been determined to be exempt from taxes pursuant to Section 23701 of the Revenue and Taxation Code.
 - (iv) A committee organized by an entity consisting of or employing more than 25 licensees of the same class which functions for the purpose of reviewing the quality of professional care provided by members or employees of that entity.
- (b) The Chief Executive Officer or Administrator of any licensed health care facility or clinic.

9. TYPES OF ACTIONS/WHEN TO FILE

- (a) A "dental disciplinary cause or reason" means that aspect of a licensee's competence or professional conduct which is reasonably likely to be detrimental to patient safety or to the delivery of patient care.
- (b) Actions described in 9(a), (b), and (c) shall be reported within 15 days after the effective date of the denial, termination, restriction, resignation, or leave of absence, or after the exhaustion of administrative procedures, without regard to any filing for review.
- (c) Actions described in 9(d) shall be reported within 15 days following the imposition of the summary suspension if the summary suspension remains in effect for a period in excess of 14 days.
- (d) When another peer review body is required to file an 805 report, a health care service plan or nonprofit hospital service plan is not required to file a separate report, with respect to an action attributable to the same dental disciplinary cause or reason.

GENERAL INSTRUCTIONS

A. CONFIDENTIALITY

This report is not a waiver of the confidentiality of dental records and committee reports. The contents of this report may be viewed only by those persons specified in Section 800(c) of the Business and Professions Code, except as required by Section 805.5 of the Business and Professions Code.

B. COPY TO LICENSEE

A copy of the 805 report, with a cover letter informing the licensee of the right to submit additional statements or other information pursuant to Section 800(c) of the Business and Professions Code, must be sent by the reporting entity to the licensee.

C. SUPPLEMENTAL REPORT

A supplemental report must be made within 30 days following the date the licensee is deemed to have satisfied any terms, conditions, or sanctions imposed as corrective action by the reporting entity.

D. QUERY TO BOARD

Prior to granting or renewing staff privileges, membership or employment for any licensee, any health facility described in (a)(i) above, or any health care service plan or dental care foundation, or the dental staff of any such institution must request a report from the appropriate Board to determine if any report has been made pursuant to Section 805 of the Business and Professions Code for any of the reasons described in No. 9 on reverse side hereof. The request must include the name and California license number of the licensee. The Board will furnish a copy of the report to the requesting institution, except when (1) the foregoing actions were taken for incomplete dental records; (2) the Board has found the information reported is without merit; or (3) a period of three years has elapsed since the report was submitted. In the event that the Board fails to advise the institution within 30 working days following the request for a report, the institution may grant or renew the staff privileges, membership and/or employment. (Section 805.5 of the Business and Professions Code.)